

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

15/09/2021

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		2		1		
4		2		1		
5		1		1		
6		1				
7		1				
8		1				
9		1				
10		1				
11		1		1		
12		1		1		
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TOTAL IND.		1		1		1
TOTAL DEP.		1		1		1
TOTAL CLAIMS		2		2		2

	IND.		DEP.		IND.		DEP.	
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TOTAL IND.		1		1		1		1
TOTAL DEP.		1		1		1		1
TOTAL CLAIMS		2		2		2		2